



State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use
Fee Paid 10⁰⁰
Date 8/25/95
✓4023

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name MARTIN K. WALTMAN SR. Home Tel: (360) 267 - 3015
Mailing Address 2968 Alexson Rd Work Tel: (360) 267 - 4016
City Grayland State WA Zip+4 98547 + 9739 FAX: () -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name _____ Home Tel: () -
Mailing Address _____ Work Tel: () -
City _____ State _____ Zip+4 _____ + _____ FAX: () -
Relationship to applicant _____

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 50 ^{500 per applicant 2/11/98 SC} (☒ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of IRRIGATION, Frost Protection, Heat Exchange. Attach a "legal" description of the place of use. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 76 27

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:
From / / to / /

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for <u>5</u> well(s).		
Number of diversions: _____						<u>per applicant 3/25/98</u>		
Source flows into (name of body of water):								
Size & depth of well(s): <u>2 SUMPS</u> <u>2 - 2" Sand Point 35' Deep</u>								
LOCATION <u>50' S + 75' W of the SE corner of Sec 7</u>								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>Approximately 50' N of South corner of Sec. 7, or Tract 10 of Benn's Cranberry Co.s Tracts and 25' West of said Northerly Point / 480' N and 700' W of the SE 1/4 corner of sec 7</u>								
1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SE</u>	<u>SE</u>	<u>7</u>	<u>T15N</u>	<u>R11W, 11W</u>	<u>Grays Harbor</u>			
For Ecology Use Date Received: <u>8/25/95</u> Priority Date: <u>8/25/95</u>								
SEPA <u>Exempt</u> /Not Exempt FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete <u>8/31/95</u> By <u>8</u> Date Returned _____ By _____ WRIA: <u>24</u>								

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: SandPoint + Irrigation Sump
- B. Briefly describe your proposed water system. (See instructions.)
My Proposed Water System will have One Sandpoint well with a 1hp Pump with the capacity to Pump 50 GPM and to discharge into a Sump that will have the capacity to hold Approximately 1.75 Acre Ft. of water. The Pond Sump will Be L shaped 100'x50', 10' Deep - My Big Ditchs will Bring Run off water back into The Sump. My IRR Pump will be a 30hp Pump Capable of IRR. 8 ACRES at 60 PSI Per Head.
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: _____ Type of connection _____ (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 7.96 to 8
- B. List total number of acres for other specified agricultural uses:
Use Frost Contrall Protection Acres 7.96 to 8
Use Heat Exchange Acres 7.96 to 8
Use _____ Acres _____
- C. Total number of acres to be covered by this application: 8 9 per applicant 2/11/98
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☒ YES ☐ NO

☒ YES ☐ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. Go South on Hwy 105 From Westport to the Local Tavern. Turn Left on County Line Rd. Cross over Cranberry Rd and Continue approx. 1/4 mile The Site is on the Left Next to two Houses at 1098 County Line Rd at the End of Gravel Driveway on the West side

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

B. Does the applicant own the land on which the water source is located? ☒ YES ☐ NO

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Walter K. Waller
Applicant (or authorized representative)

Date 8/21/95

Landowner for place of use (if same as applicant, write "same")

Date _____

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210
Section number(s) is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).